



CÙRAM IS SLÀINTE NAN EILEAN SIAR

INTEGRATION JOINT BOARD

MINUTE OF MEETING
23 FEBRUARY 2023
HELD AT 11:00AM
VIA MICROSOFT TEAMS

Voting Members Present:

Calum MacLean	Councillor, CnES / IJB Chair (Chair of the meeting)
Kenneth J. MacLean	Councillor, CnES
Gillian McCannon	Non-Executive Director, NHS WI / IJB Vice-Chair
Jocelyn McConnachie	Non-Executive Director, NHS WI
Annetta Smith	Non-Executive Director, NHS WI
Susan Thomson	Councillor, CnES

Non-Voting Members Present:

Debbie Bozkurt	Chief Finance Officer, IJB
Nick Fayers	Chief Officer, IJB
Jack Libby	Chief Social Work Officer, CnES
Morag Munro	Third Sector Representative
Karen Taylor	Patient Representative, Patient Panel

In Attendance:

Malcolm Burr	Chief Executive, CnES
Gordon Jamieson	Chief Executive, NHS WI
Emma MacSween	Head of Partnership / Community Care
Michelle McPhail	Corporate Business Manager, NHS WI

1. WELCOME

Cllr. MacLean took the Chair and led the meeting, welcoming all those attending to the meeting.



2. APOLOGIES

Cathie Anderson	Lead Nurse Community Services
Fiona Black	Union Representative, CnES, proxy
Julia Higginbottom	Non-Executive Director, NHS WI - Proxy
Tim Langley	Legal and Procurement Manager, CnES
John MacIver	Hebridean Housing Partnership ~ Proxy to Dena MacLeod
Donald MacAulay	Scottish Ambulance Service
Peggy MacKay	Third Sector
Dene MacLeod	Chief Executive Hebridean Housing Partnership
Eoin MacNeil	Third Sector
Carolyn MacPhee	Third Sector Interface Representative
Donald MacSween	Councillor, CnES
Dr. Brian Michie	GP Representative
Ann Moqbel	Service User Representative
Dana Murray	Union Representative, NHS WI
Dr. David Rigby	Non-Executive Director, NHS WI – Voting Member Proxy
Michelle Taylor	Family Planning Manager, NHS WI
Dr. Francis Tierney	Scottish Ambulance Service
Dr. Maggie Watts	Director of Public Health, NHS WI – Voting Member Proxy

3. DECLARATIONS OF INTEREST

No declaration(s) of interest(s) were raised in relation to any of the agenda items to be discussed.



4. FACILITY REVIEW

4.1 Barra and Vatersay Community Campus

Iain MacKinnon, Director for Investment Delivery, Comhairle nan Eilean Siar, presented to the Members an update on the development of the Campus on the Isle of Barra. The following points were highlighted:

- Revised total cost of the project has risen to £88.3m
- The Learning Estate Improvement Programme (LEIP) has increased its funding allocation from £13.4m to £23.5m, which is a significant and very welcomed increase in support of the funding package.
- The Comhairle, as Education authority, has to now identify, provide and secure from other sources match-funding which will lever in the additional LEIP funding.
- The finalised Outline Business Case for the healthcare element of the Campus was submitted to the Scottish Government Health and Social Care Investment Group on Friday 02nd of December 2022. It was considered by the Capital Investment Group on the 25th of January 2023 and the Health Board are still awaiting a response.
- Whilst the Health Board awaits agreement of the Capital Investment Group, in parallel the Health Board and Comhairle are waiting on confirmation from the Scottish Government to proceed to Stage 2 whilst the remaining funding shortfall is addressed.
- The Comhairle will advise of the revised delivery programme and key milestone dates as soon as possible.
- The Comhairle's bid from the Levelling Up Fund of £3.9m was unsuccessful. Awaiting the outcome of a second round of bids.
- The impact of construction inflation which has had a significant bearing on the overall cost increase in the project.
- The funding is based on a number of assumptions and the funding gap is currently £17.1m.

The Chair enquired as to why the project has been delayed. Mr. MacKinnon noted that the main issue with the project over the last 2 -3 years has been Covid and the impact the pandemic has had on the availability of trades people, the impact of increase in materials, inflation, energy costs which impact on manufacturing costs. Construction inflation is extremely high and the risk lies with the Comhairle.

There has been success in securing the funding of £71m against the cost of £88.3m and recognising the shortfall of £17m. Capital costs need to be approved by the Scottish Government Capital Investment Group before the project can proceed.



Malcolm Burr reiterated the points noted by Mr. MacKinnon but also commented on the decision making at a national level by the Scottish Government, which has held up the whole project, and continues to do so in relation to their views on the Healthcare Capital needs.

The Chair enquired if there is anything that the IJB can do to support the process.

Mr. Burr advised that he has spoken with local MSP and the Deputy First Minister seeking their input to progress the discussions within the Scottish Government.

Morag Munro reflected on the discussion, raising the point that the Health Board is not able to make the financial decision as it is subject to the Scottish Government Health Department. This just confirms that the same process would be implemented when the National Care Service comes into force, where all decisions will be made at a national level removing local democracy.

Gillian McCannon gave support to the comments made by Mr. Burr, and although Mrs. McCannon is not a member of the Executive Group, she was able to provide assurance as the Health Board Chair, that colleagues are doing all that can be done to expedite an early resolution. The level of risk which the NHS Board has, has been raised with the Scottish Government in relation to St. Brendan's Hospital. The Board has to follow the processes as noted by the Scottish Government directorate.

Mr. Burr acknowledged the comments and the process as noted by Mrs. McCannon.

Kenneth MacLean advised that the Community on Barra have a meeting scheduled with Humza Yousaf, Cabinet Secretary for Health and Social Care on the 25th of March, and if there is no further progress on the BVCC, this will be raised with him.

Decision: The Board formally noted the discussion.

Action: No actions required.



4.2 Goathill Care Campus

Iain MacKinnon provided an update on the Goathill Care Complex development, noting the following points:

- The construction work is now complete and a level of snagging and remedial work is moving forward.
- The contractor is noting that the completion date will be 27 February 2023, however it is realised that this date will not be achieved however the delay will be relatively minor.
- Work is underway in scheduling the delivery and installation of client supplied furniture, fixings and equipment in collaboration with the Contractor.
- Providing assurance to the IJB, the Comhairle will not be accepting handover of the facility until the Contractors obligations in terms of the scope and quality of the work has been confirmed.
- A period of 4 – 6 weeks will be required to ensure the operational commissioning of the buildings is complete.

The Chair asked Nick Fayers and Emma MacSween for an update on the progress of moving clients into the facility.

Emma MacSween provided Members with assurance that the delay in the completion and formal handover of the site has not impacted on the work to operationally commission the facility. Discussion with clients and their families is moving forward in relation to the physical move and there has been offers of support from families in the packing up of belongings to move to the new facility. The plan is to move the 2 care homes to the new facility within the same week, with one facility moving on the Tuesday and the other moving on the Thursday.

Nick Fayers, endorsed the work being undertaken which equates to 71 house moves of individuals and their belongings was noted as no small task. Recognising the operational logistics to address this, Mr. Fayers wished to acknowledge and thank Emma MacSween and the team involved in making this happen.

It was noted that although the handover of the facility maybe towards the end of April, work continues in holding discussions with colleagues, ensuring that everyone is well briefed as to the work needing to be undertaken and when. Families will be advised at process and dates at least 4 weeks' before the move.

Emma MacSween advised that although there may be a delay in obtaining entry to the facility, we hope with the agreement of the Contractor to enable the installation of fixtures and fittings which will help with the transition of residents as close to the date as possible.



The Chair reflected on all the work and commented that the facility provided as exemplar.

Decision: The Board noted the update.

Action: No actions required.

5. MEMBERSHIP / GOVERNANCE

5.1 IJB & IJB Audit Committee Membership update

Michelle McPhail presented the report to Members for their information, noting the current membership of the IJB as well as noting changes:

- IJB Membership
 - Leaver NHS – Tim Ingram
 - Addition NHS – Sheena Wright
 - Carolyn MacPhee, Non-voting member moved from being lead to proxy member.
 - Eoin MacNeil, Non-voting member moved from being proxy to lead member.
- Amendments noted in the membership of the Audit Committee:
 - Leaver NHS – Tim Ingram
 - Addition NHS - Jocelyn McConnachie

Decision: The Board formally noted the update

Action: No actions required.

6. MINUTES

6.1 IJB Board Minute of 08 December 2022 DA

The Minutes of the Integration Joint Board held on 08 December 2022 was approved as a correct record of the discussion held with no amendments.

Michelle McPhail noted the omission of Michelle Taylor's title, which will be rectified.

Decision: The Board formally approved the minutes.

Action: No actions required.

6.2 Matters Arising

No issues raised

Decision: -

Action: No action required.



6.3 Action Points

The following points were raised:

24.09.20 – 7.4 Review of Integration Scheme ~ Nick Fayers is in discussion with Tim Langley who will be supporting the review of the documentation. A discussion with the Scottish Government is ongoing and currently unable to confirm a delivery by date. **UPDATE**

16.12.21 – 6.2 Timetable 2022 – Nick Fayers is addressing this and will be contacting individuals to ascertain their ability and capacity to continue to support the IJB. Date of delivery is to be confirmed. **UPDATE**

16.12.21 – 6.2 Timetable 2022 – Establishing the Strategic Planning Group – The Chair enquired if this group has been established. Nick Fayers advised that the group will be created once the Strategic Plan has been approved by members. However currently the Strategic Planning Group does not meet and does not have the right membership or remit and he took the decision to disband the group until the Strategic Plan has been approved and establishes the direction of the IJB. Upon approval of the Strategic Plan, the new group will be formed and remit will be in line with the Plan.

Emma MacSween advised that previously the Planning Group could have addressed more business and been engaged more with the direction of the IJB. That is not a criticism of the group but a reflection on where things were and the need to move forward.

Susan Thomson enquired if the group was a public or internal group. Emma MacSween confirmed that the group is not a public meeting but involves specific internal and external representation. **UPDATE**

07.01.22 – BVCC – This item will be removed as the update has been provided by Iain MacKinnon. **REMOVE**

30.06.22 – Code of Conduction & Declaration of Interest - Michelle McPhail advised that to date only a limited number of people have made their declaration and as such given the length of time it's taken for people to complete their declaration a line has been drawn under the submissions to date. All members are asked to complete their declaration form and submit this by the 17th of March. **UPDATE**



30.06.22 – 7.1 Strategic Plan – SBAR – Plan to be presented in December 2022
– The development session in relation to the Strategic Plan was held and as a result of the discussion the Strategic Plan will be presented in March 2023. **REMOVE**

08.11.22 – 7.2 Unmet Need – Discuss with other agencies as to how sharing of information, appropriately, can support individuals in obtaining the right level of support. It was noted that this would be discussed with the Poverty Group within CPP. **REMOVE**

08.12.22 – 8.1 Outer Hebrides Community Justice Committee Annual Report & Chief Social Work Officer Annual Report – Reports were presented in the absence of the lead officers. No questions raised and therefore this item is removed. **REMOVE**

08.12.22 – 8.3 – Locality Planning Group (LPG) – Board Member Representation – Emma MacSween advised that to date no Council Members have noted an expression of interest.

Emma MacSween noted:

Kenneth MacLean – Barra Locality Planning Group

Susan Thomson – Uist Locality Planning Group

The remaining 3 LPGs – Harris, Rural Lewis and Stornoway would be supported by Calum MacLean, Donald MacSween and Duncan MacInnes. Emma MacSween will discuss this with them due to the absence of some members.

Morag Munro asked that local elected councillor be appointed to the Harris LPG. Emma MacSween advised that it is only those Council representatives who are members of the IJB who are appointed to the LPG.

REMOVE

Decision: The above remarks and updates were noted and will be reflected in the updated Action Points.

Action: No action required.



6.4 IJB Audit Committee Minute of 24.11.22 - A

The Integration Joint Board Audit Committee Minute of 24 November 2022 was presented for information.

No questions were raised about the November 2022 meeting. However Mrs. McCannon provided a verbal update on the discussion from the meeting earlier in the day.

It was noted that at the scheduled meeting of the 08.02.23 the committee did not have good representation as only 1 member from the NHS and 1 member from the Comhairle were available and noted repeated non-attendance of Local Authority members, with Susan Thomson being the main contributor to the discussion from the Comhairle representative.

The Committee was reconvened this morning before the Board meeting to enable a discussion on the 21 audits, from 2019 to date, with internal and external auditors present. An agreement has been obtained to focus on the high priority recommendations for implementation with the Chief Officer agreeing with the delivery timeframe.

As a result of the level of membership and quorate levels, including the disruption to the business as usual, Mrs. McCannon will be asking the IJB to approve amendments to the IJB Audit Committee terms of reference, which will include the membership representative increasing from 2 NHS and 2 Comhairle up to 3 from each side plus the attendance of the Chief Officer.

The Chair asked about proxy member attending the committee. It was noted that proxy attendees of the sub-committee is not stated in the current terms of reference. Mrs. McCannon asked Calum MacLean to become a member of the Audit Committee, when the revised terms of reference are presented and he accepted the position.

Mrs. McCannon noted that the Audit Committee meeting today proved very helpful in ensuring that all members present were updated on the position of each audit recommendation as well as the historical position.

Karen Taylor, enquired about the population statistics and how up-to-date they were in reference to the November minute.

Debbie Bozkurt advised that census data is slightly out of date, however the other way of having more specific information is from the GP register. The registers, with no indefinable details, are updated and published every quarter however the data includes temporary registration.



Nick Fayers noted that temporary residences can be any registration from a week up to 6-7 months, therefore temporary residency can be misleading.

The Chair thanked Mrs. McCannon and colleagues for their input into the minute and the updates provided.

Decision: The IJB formally noted the Minute.

Action: Calum MacLean accepted the membership of the Audit Committee, ahead of the revised terms of reference being presented in March 2023.

7. FINANCIAL GOVERNANCE

7.1 Financial Monitoring Report as at December 2022 ~ M9

7.1.1 Financial detailed report

The Chief Finance Officer, Debbie Bozkurt, drew colleagues' attention to the report as at September 2022, advising that within the Executive Summary it states June rather than September 2022. The following points were highlighted:

- As 31 December 2022 the Board is showing an overspend of £1,907k and projected to breakeven at the year-end.
- There are a number of assumptions that have had to be made when producing the month 9 accounts. These are as follows:
 - NHS Pay award will be fully funded when agreed and passed on to IJB
 - Local Authority will receive part funding for the pay award which Social Care will receive their share
 - For this financial year any shortfall relating to the LA pay award will come from general reserves,
 - Health and Social Care Partnership will be fully funded for Covid up to the agreed level of reserves
 - All recurring allocations due to NHS Western Isles relating to Health and Social Care Partnership will be received in full, still awaiting key allocations as at 16 February 2023
 - Assumption about winter inflations including heating will remain high.
- Budget areas of concern were noted as:
 - CnES Residential Care ~ projected overspend of £353k.
 - Psychiatry Consultants ~ projected overspend £730k
 - GP OOH ~ identified pressure of £534k
 - Community Hospital ~ projected overspend of £253k
 - Medical Consultants ~ projected overspend of £546k
 - Prescribing ~ projected overspend £420k
 - Home Care ~ underspend of £1.2m



The Chief Finance Officer advised that the Scottish Government have confirmed that the Covid allocation is safe and that the level in reserves will not be clawed back. Therefore there is sufficient money on both partner side for Covid this financial year, equating to approximately £2.6m in reserve. Members were reminded that there is no Covid funding in 23/24 except for vaccination programme and any Covid outbreaks within Care Homes will need to be funded from the IJB budget.

The Chair expressed his thanks to Debbie Bozkurt for the report.

Decision: The Board formally noted as assurance the report presented.

Actions: No actions required.

8. PERFORMANCE

8.1 Care at Home Unmet Need – update

The Chief Officer, Nick Fayers, drew colleagues' attention to the report specifically noting page 2 and the associated charts which noted "monthly people awaiting assessment". The chart depicted a decrease in those awaiting assessment from 134 in August down to 81 in December which in turn drives up the level of unmet need. The "monthly average weekly unmet hours per person" chart was discussed noting that in May 2022 the level of unmet need went from 14.8 hours per individual down to 8.03 hours per individual in December 2022.

This level of information is monitored regularly by the Chief Officer's senior team on a weekly and monthly basis.

Mr. Fayers advised that regarding the increasing demand for services, Board Members will be aware of the significant investment in the Short-Term Assessment and Reablement Team (START) service. Progress is underway in terms of recruitment within a newly shaped multidisciplinary team.

Mr. Fayers noted that this works sits alongside additional capacity for Hospital at Home and the move to a 7-day palliative care service. Both of these investments are planned to support individuals in their own homes and thereby lessen future demand.

In addition to the planned service development outlined above, and to address the challenges in recruitment in the core Care at Home service, several measures have been developed which include:

- Enhanced mileage rates
- Retention premia
- Grading review considering roles, responsibilities and structures.



Progress regarding the above continues with an outcome to be delivered within the financial year.

Prof. Smith welcomed the positive movement of the assessment of unmet need, however she sought clarity on the basis if more assessments were being carried out or was there, for a variety of reasons, assessments classed as no longer required.

Nick Fayers confirmed that more assessments have been undertaken rather than not being assessed. Within the portfolio of Emma MacSween, she and her team have made significant inroads to support the assessment of individual with the majority being completed within the persons own surrounding, which takes more time.

Gillian McCannon enquired about those awaiting care, which has increased slightly, and if there is a further divide between awaiting home care and residential care.

Nick Fayers noted that the predominance sits within the care in the community. There is a fixed capacity within the residential care, however the rest is within the community or home care.

Emma MacSween advised that once an assessment has been completed, for all services, the client is placed on a waiting list. When capacity is released within the system, a risk assessment is undertaken to identify what's the best use in terms of risk management for the individual and the level of resources to be allocated. Predominately the waiting lists are for home care opposed to long term care / residential care.

It was noted that the process maximises the points of care the teams can deliver with the workforce available.

Mrs. MacSween advised that in relation to agency use, there is nominal agency use compared to other authorities and that agency is only used then there are no other options in terms of increasing hours for the existing staff.

Staff may say that they can do additional hours, which they could, however staff cannot be in two places at once and therefore the use of agency is only used as a last resort.

Gillian McCannon enquired if the agency staff have been approached, to encourage them to work as a substantive position for the Social Care rather than working for an agency.

Emma MacSween noted that in some instance agency staff have taken up a substantive position.



Morag Munro enquired, reviewing the second chart relating to weekly unmet hours, what happened in July 2022 as the average hours in hospital dropped down to 3. The Chief Officer noted that sometimes during the summer there is a natural seasonal reduction in hospital need. Upon admission a person may have not had any aspect of historical support, however as a result of their condition and discharge from hospital the individual is assessed as requiring a level of initial support or longer term support.

Karen Taylor declared an interest as she cares for her husband.

Mrs. Taylor enquired about the Hospital at Home services and when a person is discharged is there any consideration for their carer, maybe a relative or next of kin, if they are able to take care of that person.

Nick Fayers, for clarity, noted that Hospital at Home is a virtual kind of hospital ward. At any point in a week there are approximately 11 or 12 people obtaining a virtual ward level of care at home, which is still under the care of a physician based at the hospital.

Karen Taylor specifically referred to the carer rather than the patient or relative, where the carer is assessed as being able to cope at the point when the hospital is discharging the person home.

The Chief Officer ascertained that this was a personal issue and he could discuss this out with the meeting.

Emma MacSween advised that there are recognitions as to the limitations of the Hospital at Home service and the challenges a carer may be faced with. The benefit of enhancing the Start Team is to align the two services, ensuring that Hospital at Home and the carers may require the support of a short term package from the social care team to make the discharge happen. Having the individual in their own home is recognised as a benefit to aid in recovery.

Gillian McCannon advised that this issue should be raised as a complaint to the NHS, rather than raising the issue within a meeting. Mrs. McCannon sympathised with the issues facing Mrs. Taylor. It was noted that there is more benefit for people obtaining necessary change for all via a more formal complaints process.

The Chair thanked Nick Fayers and Emma MacSween for the update.

Decision: The Board formally noted the report.

Action: No actions required.



The IJB took a refreshment break for 15 minutes, returning at 1:10pm.

8.2 Information Commissioner Submission Oct-Dec'23

Michelle McPhail made members aware that the submission under the Information Commissioner's Office for Freedom of Information and Environmental Information pertaining to the number of requests made to the IJB which was nil for the period of October to December 2022.

The IJB will address questions raised about its strategic function and any other request relating to the services provided by a parent body will be addressed by the parent body and noted within their submission to the Information Commissioners Office.

The Chair thanked Michelle McPhail for the report.

Decision: The Board formally noted the report.

Action: No actions required.

9. BUDGET REVIEW

9.1 Budget Plan 2023/24 - Draft

The Chief Finance Officer, Debbie Bozkurt provided Members with the draft 3-year financial plan commencing in 2023/24 which identifies budgets, savings plan and financial flexibility.

The following points were noted:

- The final budget plan will be presented to the IJB in March 2023. The draft plan presented provides members with a level of understanding on the complexities and challenges. Potentially further change budget noting specific savings may be presented in June 2023.
- The annual budget required for the delegated and set aside functions is in excess of £78.717m, which results in an initial budget gap of £6.664m. The gap on resourcing comes from:
 - NHS – gross cost = £48,760k / Total core funding =£46,907 resulting in a gap of £1,854k.
 - CnES – gross cost =£29,957 / Total core funding =£25,146 resulting in a gap of £4,811k
 - Overall gap of £6,664k



- This figure, £78.717m includes the full opening costs of the Goathill complex and excludes reserves. After earmarked reserves for the Goathill complex are included, anticipated Scottish Government Grants, unavoidable vacancies and NHS Financial Flexibility and an assumption around the full opening of Bremner Court (extra care housing) are applied, this brings the net 23/24 gap to £3.019m.
- Bremner Court - to note with recruitment processes pending conclusion and all efforts being made to maximise occupancy of the tenancies on an incremental basis if not possible in full, the financial impact of not opening in full will vary depending on recruitment and occupancy achieved.
- An estimated figure has been used for avoidable cost, but the opening of Bremner Court is not subject to achieving that avoidable cost. If the IJB do not make a high level of recurring savings each year and that the level of funding available is not increased than by 25/26 the Board could be looking at a £7.884m gross initial budget gap and a net £5.578m gap.
- £1.2m to £1.5m gap on pay awards.
- Inflation costs hit areas, noting that the NHS only receive a 2% uplift from the Scottish Government which does not cover the 30% increase in the unit cost for electricity or oil, 15% increase in food, 6% uplift on drug costs etc.
- Patient Travel costs have risen by 12.3% for patients traveling to the mainland to attend treatment.
- The initial gross gap for the IJB as at 16 February was £6.664m. Within the paper it denotes the level of savings / reserves that can be made with:
 - NHS have £1,034k savings identified
 - CnES have £1,985k of identified savings
 - Equating to a revised gap level of £3,019k.
- Scottish Government are due to provide a grant to the IJB for the Independent Supply Commission of £10.90 per hour paid, equating to £657k.
- The IJB had in reserve £2m to cover and support the cost of Goathill over the next 3 years of increased costs. With each year having £657k available per year. A discussion with offers is required identify is the split of the £2m should have more in year 1, less in year 2 and even less in year 3, however this is a discussion with Officers rather than for the Board to consider.

Nick Fayers advised that from his position he would not agree to front loading the 3 year support budget as this adds a further level of risk in utilising the resources earlier.

- Goathill start up fund is reserves held to address any initial double running costs and has in 2023/24 £600k to support this.



- Bremner Court is the 25 extra housing, which will not open at the same time as the care facility. There is £419k noted in 2023/24 associated with savings, however if the facility open earlier then the amount of savings will reduce.
- The anticipated cost of service delivery includes inflation and quantifiable cost pressures, including increase in prescribing costs, any increased care packages, pay uplifts. The expenditure budget also assumes that the specific funds will be fully utilized i.e. PCIP, Winter pressure monies etc.

Debbie Bozkurt asked Members to note the current position and advised that the final version will be made in March 2023, with a further savings plan presented in June 2023.

Mrs. McCannon enquired if inflationary costs in line with electricity increase and inflationary uplift on other commodities, will these be passed onto the residents in relation to their charges.

Debbie Bozkurt advised that the budget has been developed with the high cost of the utilities taken into consideration and the Goathill Complex budget in full includes the higher rate of unit costs for electricity, gas, etc.

Emma MacSween noted that the policy for charging within the legislation, notes the opportunity to have full costs charged. However the charges that has been levied over the years has never reached that full level and has been set lower. The charging is the responsibility of the Comhairle and the charging is not based on a full recovery system but based on financial assessment. It's for the Comhairle to ensure that the full cost is covered.

Gillian McCannon enquired if there were any carbon neutral aspects with the development.

Emma MacSween advised that the Complex has ground source heating and gas top up. The commissioning process has tried to reduce energy consumption.

Members were advised that the majority of the budget is to support the staffing level. There are no grant funding developments. The challenge is finding palatable choices as to where savings can be made, given that there are still vacancies across all service areas.



Morag Munro enquired if there was any further development in the possibility of capping the cost of the hourly rate to agency consultants.

The Chief Officer advised that it is within the gift of the Health and Social Care Partnership to do this and through the decisions of IJB Boards nationally to address.

The issue for IJBs nationally is that consultants will walk to those Boards where they will obtain more money and this is all dependent on the marketplace. Locally the pay cap could be achieved but the implication is that services may not be delivered or supported due to the lack of interest as a result of the pay cap. This is an issue that needs to be addressed at a UK wide level.

Debbie Bozkurt advised that the NHS Directors of Finance team are looking at agency pay levels along with Scottish Government colleagues.

Within NHS Western Isles, there are further restrictions on the ability to sign-off on the employment of agency staff, where following agreement by the Director of Finance and Procurement, and ensuring that the NSS frameworks have been followed, it is for the Chief Executive to sign-off on the employment of agency locums.

The Chair asked about the level of reserves available to the IJB, and noting that the budget for 25/26 is predicting a budget gap of nearly £8m, will the reserves cover this.

Debbie Bozkurt advised that the reserves we have may not be available to use but have some general reserves and by the end of 23/24 may have £3-4m possibly. It's extremely difficult to make any service change now.

Emma MacSween noted that within the report at section 10, the cost of running the Council delegated services is approximately £30m, which is fact and the available funding to deliver the service just short of £5m. The work she and Debbie Bozkurt will do to identify Financial Efficiencies will be challenging however the services currently provided, the Board and Councillors will not want to see them reduced further and we cannot go beyond that of the statutory service delivery.

The Chair thanked Debbie Bozkurt for the presentation.

Decision: The Board formally noted the report.

Action: No actions required.



10. EVALUATION

	YES	NO	COMMENTS
Were you satisfied that the agenda items presented covered the current significant areas?	✓		
Was there sufficient time to review the papers between receipt and the meeting date?	✓		
Was there sufficient time allocated to all agenda items?	✓		
Were the Executive Summaries an accurate reflection of the detailed paper?	✓		
Were you able to reach a satisfactory conclusion from the information presented on each item?	✓		
Were you able to contribute to the discussions and have your views considered?	✓		
Did you consider that the Board discharged its duty in respect of: <ul style="list-style-type: none"> • Proper scrutiny • Relevant questioning • Constructive challenging 	✓ ✓ ✓		

11. DATE AND TIME OF NEXT MEETING

Location: Microsoft Teams

Time: 10.00am

Dates:

Meeting Date	Submission of Papers
23.02.23	10.02.23
30.03.23	17.03.23
29.06.23	16.06.23
28.09.23	15.09.23
30.11.23	17.11.23

The Chair thanked everyone for their contribution to the discussions and the pertinent scrutiny of reports in a very constructive manner. The Chair brought the meeting to a close at 2:00pm.

END

